



JAPRAK



www.lichthansa.com
fax: 0421-22 104 26
tel: 0421-22 104 22

LTT LIGHT THERAPY EASILY DONE

http://www.lichthansa.de / com. e Mail. info@lichthansa.de phone (+49) 0421 - 2210040 -2210422 faxes. (+49)042- 2210041 - 2210426

ARTHROSE SPECIAL 5

A modern treatment: Which role plays the light-thermo-therapy ©® by Arthrose treatment?

Arthrose / Osteoarthritis

The Arthrose (synonym): Osteoarthritis, also as degenerative joint-illness of one or several joints, as a cartilage destruction marks, means a faulty-function of the diarthrodial (movable, from which lines Synovialis) joint.

By the idiopatisch (primary) Arthrose, the most frequent form of this illness, there are no obvious predisposing factors.

The secondary Arthrose is pathologically-morphologically not possible to distinguish from the idiopatischen Arthrose. It is based on the following reason .

Epidemiologie/risk factors

The Arthrose is the most frequent joint-illness of the human being. Genetic or endokrinologische factors lie at the base of the primary Arthrose. One distinguishes between the primary and the secondary form of the Arthrose:

Causes significant for the secondary Arthrose among others are:

präarthrotische Deformitäten, Adipositas, Metabolism-illnesses, burden, inflammations, Alterung or immobilization.

The CPPD - Arthropathie „gout “can cause asymptomatisch, acute, sub-acute or chron. proceeds or one on chron. concerned joints overlaid acute Synovitis. Up to the 55 year of life the joint-distribution of the Arthrose by men and women is similar. By older persons, the Coxarthrose is to be found by men more frequently while the Arthrose of the Interphalangeal joint and the thumb-saddle-joint occurs by women more frequently.

Clinical results

the joint pain of the Arthrose is often described as deep pain in the area of the concerned joint. Characteristically, the pain of the Arthrose is reinforced by manipulation by the joint and Movements are restricted , hindered, that can disturb sleep also with progressing of the illness, particularly with the advanced Coxarthrose . Stiffness and movement-pain of the concerned joint by the morning getting up or after an inactivity-

period can be distinctive, but usually continue less than 20 minutes.

By this patient with advanced knee-joint-arthrose, the knee are deformed in typical manner and in Varusfehlstellung.

Since the joint-cartilage has no pain-receptors, by the Arthrose the joint-pain must come in other structures. By patients it can be a consequence of the stretching of the nerves in the bones covered periosts .

Muscle-spasms and a joint-instability, that lead to the stretching of the joint-capsule, ligaments stretching , just as muscle-spasms can be also painful.

Additionally one recognizes by both legs in the lower part variköse changes.

At clinical symptoms impresses morning movement-pain, Troubles with burden of the concerned joints as well as quick tiredness.

Arthrose of certain joints The Osteoarthritis manifests itself most frequently as Gonarthrose, Coxarthrose or Fingerpolyarthrose.

Interphalangeal joints:

Interphalangeal joints: by Fingerpolyarthrose further erosional Arthrose are concerned most frequently the distalen and proximalen Interphalangea joints of the hands. The erosional Arthrose is in tendency more destructive as a typical noduläre Arthrose. The Rheumatoide arthritis begins in more than 40% of all cases at the finger-base - and middle-joints.

Generalized Arthrose is marked by the participation of three or more joints or joint-groups.

Clinical picture of the Fingerpolyarthrose is located mainly with women after the menopause. It can appear isolated only at the finger-end joints (Heberden-Arthrose) or finger-middle-joints (Bouchard-Arthrose), however more frequent is a combination of the two forms.

By these patients, tubercles in the area of the finger-end joints as well as an incipient Arthrose at the finger-middle-joints impresses.

Demineralisierung by soft-part-compression in the area of individual Metakarpophalangeal joint and Proximales Interphalangeal joint as well as the wrists with distinctive destructive and degenerative changes.

Thumb-saddle-joint: That with the Arthrose at the second region involved most frequently is the thumb-saddle-joint. By the thumb-saddle-joint one recognizes a insufficient Rizarthrose.

The thumb-saddle-joint (Rizarthrose) is first of all of clinical importance . Different diagnostical are the arthritis urica and the rheumatoide arthritis of the Fingerpolyarthrose.

Beside pains, stiffness and cold-sensitivity, the increasing functionloss of the thumb is of clinical importance since the hand in its function is impaired considerably by it.

Hip-joint: Kongenital and development-conditional defects, for example hip-joint dysplasie, can be the cause of a Coxarthrose by up to 80 percent of the cases .

In the course of the Rheumatoiden arthritis, an increasing Deformität is located characteristically in the area of the concerned joints.

By this patient distinctive destructive and degenerative changes appear with synovitischer swelling and deformation first of all in the area of the hip-joints.

The function-hindrance is considerable.

Knee-joint: The Gonarthrose can involve the medialen or lateralen Femorotibialen sections and the Patelofemorale section.

Spinal column: Degenerative changes of the spinal column can involve the inter-vertebra-joints, the inter-vertebra-disks and the paraspinalen columns.

One speaks about Spondylosis as well as about Chondrosis, Osteochondrosis, or Spondylosis

Spondyloosteochondrosis by degenerative illness of the disks.

In the course of the Spondylosis Spondyloosteochondrosis an increasing deformation is located characteristically in the area of the concerned joints. By this patients distinctive destructive and degenerative changes appear by synovitischer swelling and deformation above all in the area of the spinal column, the inter-vertebra -joint, the inter-vertebra-disks and the paraspinal columns. The function-hindrance is considerable.

Therapy / general therapeutic measures

The treatment-goals of the Arthrose consist of the pain-reduction,

support of the mobility and minimization of hindrances.

Since an existing Arthrose can be made no longer declining, the goal of the Arthrose-therapy is the progression- delay, the support of the joint-function and the improvement of the life-quality of the concerned.

A clinically symptomless Arthrose should be treated merely from preventive point of view. For the light ill patients be sufficient only encouragement, instructions respecting the joint-protection and an occasional analgesics.

Therapy without medicament

An Arthrose can be evoked or exacerbated through a bad joint-mechanics.

The correction of a bad body-stand,

and the reinforcement of an excessive Lendenlordose can be helpful.

The patients should be informed about their illness-picture and about measures, that they themselves can take. A big meaning has physical therapy:

Daily movement and gymnastics to the support and improvement of the joint-mobility

Silence-periods during the day lead to the subjective improvement.

The light-thermo-therapy, heat, massages and physiotherapy!

The light-thermo-therapy, heat, massages and

> Physiotherapy to the elimination of muscle-tension

>Using of unburdening aids like insoles, knee-joint-supports, walking sticks, etc

>Die CaOx - Arthropathie „gout“ by not-steroidalen

Antiphlogistika, Cholchicin, intraartikulären

Glukokortikoiden .

>Gewichtsreduktion lead to the relief of the joints

By old patients, a long-time-ordinance should take place under control of the kidney-function since a deterioration of the kidney-function can appear. The light-thermo-therapy helps by optimal arrangement of metabolism-illnesses and circulation-disturbances of medicament- therapy. Up to the present-day day the therapy of the Arthrose had palliativen character, because until now there was no medicament, that prevents the illness by the human being, delays the illness-course or declines the pathological changes of the Arthrose .

By the medicament- therapy of the Arthrose different substances are used :

NSAR: Is to be recommended on the basis of its potent antiphlogistischen qualities above all in the stage of the activated Arthrose. Since NSAR besides the anti-inflammatory qualities has also an efficient analgesic potential, an ordinance is meaningful also by chronic pains without inflammable process.

In the case of a very strong distinctive pain-symptomatic, according to the grade-scheme of the World Health organization (WHO) a combination with classic analgesics, for example Tramadol, Morphin, is recommended.

Kortikoide: As intraartikuläre injection only by activated Arthrose.

Analgesics: By pain-symptomatic without arthritis.

Chondroprotektiva: Besides a pain-hindering effect, a knorpelprotektive effect is prescribed. Following substances are to be named on this occasion: D-Glucosaminsulfat, Oxaceprol or Ademetionin.

Hyaluronsäure: Improved after intraartikulärer injection of the Elasto-Viskosität of the joint-liquid. A cartilage-reduction hindering effect is discussed.

Vitamin E: Seems to have favorable effects in high dosage by arthrotic changes.

Surgical therapy

A joint-substitute-operation (endoprothetische care) should be possible only for those patients who have advanced Arthrose with considerable pains and malfunctions of the concerned joint. Main-indications are the painful Coxarthrose and Gonarthrose.

A knorpel-plastic as a kind of the treatment of the Arthrose plays a certain role.

Other operative possibilities are among others the Umstellungsosteotomie, Denervierungseingriffe, Denudation of Osteophyten, a knot -plastic (Knorpelglättungen) .

Light-thermo-therapy instrument

Long-time-therapy (LTT) and Reha - measures

Stationary Reha - measures or bath-cure can positively influence the symptom.

The duration of long-time-therapy (LTT) light-thermo-therapy instrument

and gymnastics to the support and improvement of the joint-mobility by the

treatment of the patient should be recommended in accordance with the therapy-concept and after Reha - measures .

Therapy indications with the light-thermo-therapy appliance

Seasonal dependent depressions - SDD

Arthrose and Osteoarthritis pains, (bones and joint-inflammation)

Myalgie skin-illnesses

Wound-cure accelerated

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Ltt instrument for three-months for patient practices and clinics €116.00

By purchase taken into account / plus transportation and postage

End price of the appliance:

Light-thermo-therapy instrument €399.00

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Lichthansa.com - Medical

Gröpelingerheerstr. 155 28237 Bremen

Fax. (+49) 421 2210 041 telephones (+49) 421 2210 040, and (+49) 421 2210 426 and, (+49) 421 2210 422

Imprint: JAPRAK. LTT LIGHT THERAPY EASILY DONE

LICHTTHERMOTHERAPY SYSTEM FOUNDATION - INFO

Phone (+49) 0421.2210 040 - 422 Fax.0421.2210 041- 426

http. www. lichthansa.de / com e Mail. info@lichthansa.de

LICHTHANSA MEDICAL: Vionvillestr.7 / 28211 Bremen